File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319



FOR INSTRUCTIONS SEE BACK OF FORM

3 A ETHICS AND &

2008 OCT .-

Fax: 515-281-4073	DISCLOSURE	SUMMARY PAGE		AM 8: 19
	e same as on Statement of Orga	· ~ ^	FORM	1
LOMMITTEE	la discr Disv	INS FOR JURRACE	DR-2	DISCLOSURE
(1)Statewide/Legislative/Judge \$ (4)County Central Committee (5)	of committee you are reporting for: [Standing for Retrention Candidate (2 5)County Candidate (6)City Candidate ty PAC (9)City PAC (10)School B		(Rev. 07/200	7) REPORT
CANDIDATE COMMITTEES Candidate Name	ONLY: L'EVENZALS	Political Party (if applicable)	Scanned	
Office Sought SUZEIN		District (if Senate or House)	Audited	
ate reports are subject to possi	ble civil and criminal penalties. Pur	rsuant to lowa Code sections 68B.32A	(7) and 68A.401(3), th	e candidate, for a
0A		(11a)246-3095	<u> </u>	14/08
SIGNATURE OF PERSON FI	LING REPORT	TELEPHONE	DAT	E SIGNED
AM FILING A OCTOBER	는 (년년, 교수조용 eport date)	REPORT FOR (1) ELECTION . Indicate by #		YEAR.
CHECK IF AMENDMENT T	O REPORT DATED		Local Committees, ente	
(You must continue t	ation) report and attach Notice o o file reports until a DR-3 is filed.	.)	County & Local Commit which Election is held FREMONY	
STATEM	IENT OF CASH ON HAND)		
committee This am	ning of the reporting period. (To ount MUST be the same as the o period or must be zero if this is fil	tal of all funds held by the cash on hand at the end rst report filed.)	s <u>83</u>	35.95/
	Y TAKEN IN THIS PERIOD			651
Schedule A: Cash C	ontributions total (Attach Schedu	ule A) (*alsc see in-kind below)		Ø.00/
Schedule F: Loans	Received total (Attach Schedule	F)		*
Schedule H: Total S	ales of Campaign Property (Atta	ich Schedule H)		<u> </u>
(Schedule	H applies to Candidates' Comr	nittees Only) SUB-TOTAL	<u> </u>	5.95/
SUBTRACT TOTAL	MONEY SPENT THIS PERIOD			
Schedule B: Expend	ditures total (Attach Schedule B)	(**also see debts and loans below)		51.51/
		le F)		%
CASH ON HAND at the end o	of this reporting period (if final rep	ort balance must be zero)	s <u>3</u> 3	34.34/
**IINPAIO BILLS /From Sche	dule D - Attach Schedule D)		\$	
		dule E)		
		ile F)		
CONSULTANT BREAKDOW			YES _	NO
CANDIDATE COMMITTEES				
	PERTY (From Schedule H - Atta	ach Schedule H)	\$	
		int bank statement in January of eac	h year.	

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT BLEVILLS FOR SIZELYFF

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
CHECK THIS BOX IF AMENDING FORM	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DDYR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	ID#	L. J. Boyce.			
9/21/08	CK#2084	L. J. BOYLE 1303 KEDENEY DUE RIVERTON, ZA 51650	FEIEND	1000 .00y	<u> </u>
	ID#				
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	CK#				
			SUB-TOTAL	\$ 10505-09	
		TOTAL (if lest pe	ge of this schedule)	* 1000- 1	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page _____ of ____ (for Schedule A)

AMENDING FORM

FOR INSTRUCTIONS, SEE BACK OF FORM

	SCHEDULE		
CCOUNT	(Rev. 07/03)	MONETARY EXPENDITURES	
GISLATIVE	CHECK THIS BOX IF		

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization) EECT MERIFF DIEVINS MMITTEE AMOUNT PURPOSE NAME AND ADDRESS TO WHOM CANDIDATE (DESCRIBE TRANSACTION) EXPENDED ID NUMBER EXPENDITURE DATE (Disbursement) WAS MADE **EXPENDED** (If applicable) AND PAC (MM/DD/YR) CHECK NUMBER ID# Szaney Droos NEWSPAPER 7/27/48 CK# 64.5% SZDWEY, JA 51652 LOUSETISEMENT 103 ID# DALLEY NEWS News PAPER ⁹153.77 7/28/08 CK# SHENANDOAN, ID 51601 DOUBLETS EMENT 184 ID# HAMBURG KEPGETER Dews PAPER 479.18 CK# 7/28/08 DOUGRTISEMENIN 105 lamburb IA 5164B ID# Coway For DAL MART 35.95 CK#106 7/28/08 HAMBURG PARADE SHEWANDOAH, IA 51601 ID# TABOR DEACON DEWS PAPER CK#1057 25. 814108 TABOR ZA 51653 DUSETISEMENT ID# JAMBURG (EPORTER Wewspaper CK#(\$8 lambues, IA 51640 SDURRTISEMENT 818108 1D# STAGEDUAL POPER TRAIL 85.60 CK# 9/10/108 DROCHURE DHELLIDOON, IS 51601 ID# STACECUA PAPER TRAIL 9/23/08 CK# DROCHURE 10012 AI, HADGUAUSHC 110 SUB-TOTAL 601.51 TOTAL (if last page of this schedule)

		COMMITTEES	

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A-402(3)(i).)

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